

***United States Court of Appeals
for the Second Circuit***



APPENDIX

11/6
75-6038

UNITED STATES COURT OF APPEALS
SECOND CIRCUIT

MABEL M. CASE,
d/b/a/ CASE NURSING HOME,

Plaintiff,
Appellant,

-VS.-

CASPAR WEINBERGER, as Secretary
of the United States Department of
Health, Education & Welfare;
BERNICE L. BERNSTEIN, as Regional
Director for Region II of the
United States Department of Health,
Education & Welfare; ALAN J.
SAPERSTEIN, Director, Office of
Long Term Care, Region II, HEW;
ABE LAVINE, Commissioner of the New
York State Department of Social
Services; and JOHN LASCARIS, Com-
missioner of the Onondaga County
Department of Social Services,

Defendants,
Appellees

SECOND CIRCUIT
DOCKET NO. 75-6038

APPENDIX -- VOLUME 3

Pp. A-153 -- A. 212

MICHAEL A. WINEBURG & JOSEPH C. SCOLLAN OF COUNSEL

MICHAELS, MICHAELS & WINEBURG

ATTORNEYS AND COUNSELORS AT LAW

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AUBURN, NEW YORK 13021

PAGINATION AS IN ORIGINAL COPY

Case Nursing Home

EXHIBITS

Exhibit
No.

- 1 State Survey Agency Fire Safety Survey, 9/8/72
- 2 SNF - 1 - State Survey Agency Recommendation on Life Safety Code Waiver, 11/9/73
- 3 State Survey Agency Fire Safety Survey, 12/20/73 and 5/15/74
- 4 HEW Fire Safety Survey Report, 10/21/74
- 5 HEW Letter to Facility Indicating Life Safety Code Deficiencies, 11/5/74
- 6 Letter From Facility to HEW Requesting Review Proceeding, 11/9/74
- 7 Letter From Michael Wineburg Reaffirming Proposed Structural Modifications and Specifications, 1/20/75
- 8 Decision on Life Safety Code Waiver, 3/25/75

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Medicare

U. S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

Medicaid

REPORT OF FIRE SAFETY SURVEY IN EXTENDED CARE FACILITIES & SKILLED NURSING HOMES

Part I is a guide to surveying for compliance with the Life Safety Code (21st edition, 1967). Part II contains those Medicare and Medicaid fire safety requirements not otherwise identified in the Life Safety Code. Part III is a certification form to be completed by the fire authority when specific provisions of the Life Safety Code are waived.

Identifying information as shown in applicable records. Enter changes, if any, alongside each item, giving date of change.

1. Name and address of facility

Care Nursing Home
119 Kirk Ave., Syracuse, N.Y.

2. Provider number (title XVIII)

Vender number (title XIX)

3. Survey for Certification of:

A. ☒ Entire facilityB. ☐ Extended or skilled care unit1. ☐ Hospital (type) _____2. ☐ Nursing home3. ☐ Rehabilitation center4. ☐ Domiciliary institution5. ☐ Institution for retarded6. ☐ Other
(Specify) _____

4. Number of EOF beds certified for Medicare _____

Number of skilled nursing beds certified
for Medicaid 21Number of intermediate care beds certified
for Medicaid _____5. Number of beds in entire facility (certified and
non-certified) 21

6. The facility meets ☐ does not meet ☒ such standards of the National Fire Protection Association's Life Safety Code (21st edition, 1967) as are applicable to nursing homes.

Surveyor *Ralph W. Thompson*Title *Superintendent*Date of Survey 9/8/72

Part I - This is a guide to surveying for compliance with the Life Safety Code. It is not intended to be an all inclusive listing of Life Safety Code requirements, but rather as a guide to be supplemented by reference to the Code.

	Yes	No	Explanatory Statements
<u>EXITS</u>			
The exitways, exit openings, and exit discharges are so located and of sufficient number and width to permit the prompt evacuation of patients.			
<u>Number and Type</u> - At least 2 exits, remote from each others, are provided for each floor or fire section with at least one of the exits leading directly outside the building or to an interior stairway leading outside the building.		✓	not remote - within 15' of each other neither leads directly outside - passage thru combin. lobby-office-sitting rm. or thru kitchen necessary
<u>Access</u> - Every aisle, passageway, corridor exit discharge, exit location and "access" has a readily available egress leading to the exit.		✓	corrid. less than 48" stairway obstructed by at bottom of front stairs - chair in landing on 2nd
<u>Capacity</u> - The capacity of exits providing horizontal travel is 30 persons per exit unit. Where the travel is over stairs, the exiting capacity is 22 persons per exit unit.	✓		
<u>Horizontal Exit</u> - Any horizontal exit is in accordance with Section 5-5 and has at least 44 inches in clear width. n.g.			no horiz. exits
<u>Corridor Egress</u> - Every corridor provides access to at least two approved means of egress from the building, without passing through any intervening rooms or spaces other than corridors or lobbies.		✓	passage thru kitchen or sitting rm. is necessary

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Life Safety Code Provisions	Yes	No	Explanatory Statements
<u>Corridor Width</u> - Any required aisle and corridor is not less than 48 inches in clear width when serving as means of egress from institutional sleeping rooms. (For new construction the corridor is 8 feet clear width.)		✓	Some less than 48" 38" on 1st "35" to 47" on 2nd
<u>Dead End</u> - There is no corridor dead end exceeding 30 feet in length.	✓		
<u>Room Egress</u> - All of the facility's sleeping rooms have a door leading directly to a corridor providing access to an exit.		✓	rear bedrm. 1st fl. exits thru kitchen
<u>Travel distances</u> to an exit do not exceed 100 feet from the door to any room nor 150 feet from any point in any room. (In buildings completely protected by an automatic sprinkler system these distances may be increased by 50 feet.)	✓		
<u>Door Width</u> - Any doorway to a patient's sleeping room, any doorway between these occupied spaces and the required exits and exit doorways are at least 40 inches. (44 inches in new buildings.)		✓	28" to 29 1/2" except glass paneled double doors to rm. #1 (50 1/2")
<u>Patient Rooms</u> - If locks are installed on patient sleeping room doors not leading directly to the exterior of the building, they can be locked only from the corridor side. All sleeping room locks are readily opened by the patient from inside the room without the use of a key.	✓		
Doors to patient rooms are 1 3/4" solid wood bonded core doors or the equivalent, with any openings limited to 1296 square inches with wired glass in approved metal frames. (Undercutting of such doors is not permitted).		✓	panel type doors some glass paneled
Every door in the line of exit travel from a patient's sleeping room is of the swinging type.	✓		

Life Safety Code Provisions

Yes No

Explanatory Statements

Window - Every patient's bedroom, unless it has a door leading directly outside of the building, has at least one outside window, which can be opened from the inside without the use of tools.

✓

Fire and Smoke Partitions - Every door in a fire partition, horizontal exit, and smokestop partition may be held open only by electro-magnetic devices and is capable of being opened and closed manually. The door is closed upon actuation of the fire alarm system and by each of the installed approved methods. (Shown as A,B,C under "Explanatory Statements.")

Any door to a stairway enclosure or to a wall separating hazardous areas is not equipped with hold-open devices and bears an appropriate sign indicating that this is a fire exit and must be kept closed.

✓

Fire doors of at least Class B, 1-hour rating are provided in openings to:

Large storage rooms

✓

Boiler rooms

✓

Incinerator rooms

✓

Laundry and trash chutes

✓

Dishwashers

✓

Stairways

✓

No fire or smoke partitions

Indicate which of the following methods will automatically close fire or smoke doors:

- ☐ A. Activation of the sprinkler system;
- ☐ B. Actuation of any detector of a complete smoke or products of combustion detection system;
- ☐ C. By local detection devices installed to detect smoke or other products of combustion on either side of the door opening;
- ☐ D. Other (describe) _____
- ☐ E. Doors do not close automatically

No signs Door at 2nd floor propped open with a chair.

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Life Safety Code Provisions	Yes	No	Explanatory Statements
<u>Stairs, Structural Towers, Ramps</u> All stairs serving as required means of egress are of permanent fixed construction.	✓		Indicate stair class (Sec. 5-1121) A-158 <input type="checkbox"/> Class A <input type="checkbox"/> Class 2
Every stair and structural tower is Class A or B (Class B specifications are not acceptable in new construction.)		✓	<input type="checkbox"/> Class 2
<u>Exit Signage and Floor</u> - Exitways are illuminated at angles, intersections, landings of stairs, and exit doors to values of not less than 1.0 foot-candle measured at the floor.	✓		No emergency lighting except flashlights Indicate type of construction (as defined in NFPA 220)
Required emergency lighting is automatic and not manual.		✓	Fire Resistive Non-Combustible
Emergency lighting with an independent power source is provided.	✓	✓	<input type="checkbox"/> Protected <input type="checkbox"/> Non-protected
<u>Fire Protection</u> The building is adequately protected against the spread of fire and smoke and is equipped in accordance with the Life Safety Code to detect, contain, and extinguish fires.	✓		Ordinary Heavy Timber <input type="checkbox"/> Protected <input type="checkbox"/> Non-protected
Building Construction complies with Section 10-1321 and 10-1322.		✓	Wood Frame Multiple Construction <input type="checkbox"/> Protected <input type="checkbox"/> Non-protected Explain Type
Corridor enclosures between sleeping rooms and treatment areas are separated by construction having at least a one-hour fire resistance rating, with openings therein, if any, limited to 1296 square inches and glazed with wired glass in approved metal frames.		✓	Number of stories (not including basement or cellar) <u>2</u> If multiple stories, indicate floors on which patient rooms are located: <u>1 and 2</u>
<u>Division of Floor Areas</u> - Each floor used for sleeping rooms for more than 30 patients, unless provided with a horizontal exit, is divided into at least two sections by a smoke barrier. (New buildings are required to provide compartmentation on patient floors regardless of the number of patients.)			Date building permit issued or approval given by appropriate authority <u>6. 6. 1968</u> Date and description of type of all subsequent construction including renovations, additions or deletions

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Life Safety Code Provisions	Yes	No	Explanatory Statements
Aisle space is provided on each side of the barrier for the total number of patients on both sides.	✓		N/A, no barriers
The corridor length is no more than 150 feet without exit barriers or horizontal exits.	✓		
Common wall - If the building shares a common wall with a non-conforming structure, the wall is at least a 2-hour fire rated partition, with any openings protected by self-closing class B 1 1/2 hour fire doors.	N.A.		Not applicable
Smoke barriers have at least 1/2 hour fire rating and are continuous from wall to wall and floor to floor or roof deck above. (In new buildings, the smoke barrier has a fire resistance rating of one hour.)	N.A.		lacking
<u>Protection of Vertical Openings and Firestopping</u>			4th adobe board on both sides of west stair 2nd floor of west stairs
Stairway - Each stairway between stories is enclosed with partitions having at least a 1-hour fire resistance rating to prevent the spread of fire between stories.	✓		
Roll-up doors - are in a closed position except that if left open they must close automatically in case of fire by electro-release device.	N.A.		downward shaft has less than 2 hr. protection plywood doors cov. with 1/2" adobe board both sides, inadequate latches horizontal shaft gypsum board lined no sprinkler in shaft
Vertical Shafts - Elevator shafts, light and ventilation shafts, chutes, and other vertical openings between stories are protected as required for stairways.	✓		

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Life Safety Code Provisions	Yes	No
<u>Exit Stairs</u> - Combustible concealed spaces are fire stopped.	✓	
<u>Open and Trash Chutes</u> - Any linen and trash chute which opens directly into a corridor is sealed by fire-resistant construction to prevent further use or is provided with a 1-hour fire door assembly suitable for a Class B location. (In new construction, chutes and incinerator flues do not open directly into an exit corridor and chutes are sprinklered.)	✓	
<u>Interior Finish</u> - Interior finish is Class A or Class B. In completely sprinklered buildings, Class C interior finish may be continued in use. In newly constructed buildings, means of egress and patient rooms accommodating more than 4 patients is of Class A interior finish.)	✓	
<u>Floor Covering</u> - Has no more than a 75 interior finish flame spread rating when tested in accordance with NFPA Std. No. 255. Floor covering is required to be tested, only when the fire authority of jurisdiction believes the floor covering to constitute an unusual hazard.)	✓	
<u>Sprinklers</u>		
<u>System</u> - Automatic sprinkler protection is provided throughout the facility, with adequate water supply and pressure. 15 psi. at the most remote sprinkler heads.)	✓	

sealed exit but not with adeq. fire resistant material (plywood)

class C but bldg completely sprinklered

Floor Covering

☐ Carpet not tested

☒ Not applicable. (Floor covering not hazardous.)

If carpeting has been tested show:

Test Rating _____

Date Tested _____

Testing Laboratory _____

Sprinklers

☒ Not applicable. Facility is fire resistant building or 1-hour protected noncombustible building of one story.

Indicate date 1/7/77 automatic sprinkler system was last checked and necessary maintenance provided. Show who provided the service: A. D. T.

Note the type of water supply to the sprinkler system public

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Life Safety Code Provision

Yes

No

Explanatory Statements

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If the preceding sprinkler coverage provision has been answered "no," answer next four items:

(1) Hazardous Areas - All hazardous areas are sprinklered

(2) Detection System - Automatic fire detection devices are installed in all areas required by the Life Safety Code to be protected by an automatic sprinkler system. The detection system is listed with UL's Fire Protection List, issuance of January 1971. The system is arranged to close all fire doors in barrier partitions and, where possible, shall be hooked into the local fire department or central control. At a minimum the detection system must activate an alarm system inside and outside the building.

(3) Compartmentation - Patient rooms are separated from each other and all other areas by construction having at least a 1-hour fire resistive rating.

(4) Fire Department Response - The response time and capability of the local fire department is adequate, in the judgment of the State Fire authority official, to provide an acceptable level of protection for an unsprinklered facility.

Please indicate type of detectors

Areas protected by detectors

☐ State fire authority official's statement regarding local fire department capability is on file.

Alarm System - The automatic sprinkler system is electrically inter-connected with the fire alarm system. The main sprinkler control valve is electrically supervised so that at least a local alarm will sound when the valve is closed.

Manually operated alarm system is provided and tested at least weekly. (Pre-signal system is not acceptable.)

Extinguishers - A sufficient number of fire extinguishers are properly situated, checked annually, and are maintained in workable condition, in accordance with NFPA Standards 10 and 10A.

connected to fire alarm system
but main sprinkler valve is not supervised

No manual alarm system
Date manual alarm system last tested

Indicate who provides maintenance of
the extinguishers Fire Equipment Service Co.

Date extinguishers last checked/serviced
12/71

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Life Safety Code Provisions	Yes	No	Explanatory Statements
<u>Hazardous Areas</u> - Every hazardous area has automatic fire protection or is separated by construction having at least 1-hour fire resistance rating. Where a hazard is severe, both fire-resistive construction and automatic fire protection is used.	✓		Following hazardous areas are protected automatic extinguishing systems and/or fire separated. AES - Automatic extinguishment system S - Separated
<u>BUILDING SERVICE EQUIPMENT</u> Air exchange and conditioner service equipment is designed, installed, and maintained so as not to precipitate or spread fires.	✓	✓	<u>AES</u> <u>S</u> ✓ -- Boiler, heater rooms ✓ -- Incinerator ✓ -- Laundries -- -- Repair shops -- -- Laboratories using quantities of flammable solvents ✓ -- Areas storing quantities of combustibles -- -- Trash collection rooms -- -- Employee locker rooms -- -- Soiled linen rooms ✓ -- Kitchen -- -- Handicraft shop -- -- Gift shops
Air conditioning, ventilating, heating, cooling, and other service equipment appears to be properly installed and maintained.		✓	
Heating devices are designed or enclosed to prevent the ignition of clothing or furnishings.	✓		
Portable comfort heating devices are not used. (Indicate "yes" if requirement is met.)	✓		
Products of combustion from heating devices are vented outside and air for combustion is taken from outside.	✓		

Lack range hood and exting. sys

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Life Safety Code Provisions	Yes	No	Explanatory Statements
<u>OPERATING FEATURES</u>			
Operating safeguards adequately protect the occupants of the facility against the hazards of fire.			
<u>Fire Protection Plan</u> - The facility has in effect and available to all supervisory personnel written copies of a plan for the protection of all persons in the event of fire and their evacuations to areas of refuge and from the building.	✓		
<u>Evacuation Plan Posted</u> - The evacuation plan is posted in prominent locations on all floors.	✓	✓	none posted
<u>Fire Drills</u> - Fire drills are held at least 12 times a year.		✓	Fire drills were conducted over the past 12 months on each shift on the following dates:
Fire drills are conducted at irregular intervals during day and night to familiarize all employees with their responsibilities.		✓	Day _____ Evening _____ Night _____
<u>Furnishings and Decorations</u> - Furnishings and decorations do not obstruct exits or the ability to locate exits.		✓	Training session records for Sept. & Nov. but no records of surprise drills
All combustible draperies and curtains (including cubicle curtains for decorative or acoustical purposes) are rendered and maintained flame retardant.		✓	Chairs obstruct
Waste baskets are of non-combustible material.		✓	plastic.
<u>Smoking</u> - Smoking regulations are in effect and are prominently posted throughout the building.		✓	none posted

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PART II

Part II contains those requirements not otherwise identified in the Life Safety Code.

Other Requirements	Yes	No	Explanatory Statements
The facility complies with all applicable State and local codes governing construction and fire safety.		✓	Building code adopted by jurisdiction: <u>International</u>
Reports of periodic inspections of the structure by the fire control authority having jurisdiction in the area are on file in the facility, including documentation of corrections made.		✓	Date of last fire inspection: <u>1/2/75</u>
Corridors used by patients are equipped with firmly mounted handrails on each side.	✓		
Blind patients and non-ambulatory or physically handicapped patients are not housed above the street level floor, unless the facility is of fire resistive construction, 1-hour protected non-combustible construction, or 1-hour protected ordinary or wood-frame construction sprinklered throughout.		✓	not complete
The building is maintained in good repair and kept free of hazards such as those created by any damaged or defective building equipment.		✓	born 1/1/75
No occupancies or activities undesirable to the health and safety of patients are located in the building or buildings of the extended care facility.		✓	
Non-flammable medical gas systems, such as oxygen and nitrous oxide installed in the facility comply with applicable provisions of NFPA Std. No. 96 on incubation therapy.			born 1/1/75

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PART III

WAVVER OF SPECIFIC LIFE SAFETY CODE PROVISIONS

The following unmet provisions of the Life Safety Code (21st Edition, 1967) do not adversely affect the health and safety of patients in the extended care facility for the reasons set forth below. In addition, strict adherence to these Code provisions would result in an unreasonable hardship on the facility.

For forms which are surveyed for title XIX, Form ERO-MSA-4(LTC)(OMB 83-10259) - "Recommendation for Waiver" must also be completed for each unmet provision waived.

Signature of fire authority official

Title

Office

Date

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SURVEY AGENCY RECOMMENDATION FOR LIFE SAFETY CODE WAIVERS

Part A - To be completed by the Survey Agency

1. Name of Nursing Home CASE NURSING HOME Tel. No. GRG - 2567
Address 119 Kirk Avenue State SYRACUSE, N.Y. 13205
Date of Survey Sept. 8, 1972 Date of This Request Nov. 9, 1972

2. Justification: (For each section of the Life Safety Code - 1967 (NFPA-101) recommended for waiver, include Section No., summary of requirement, and documentation. Use 8½x11 sheets of paper if additional space is required.)

We do not recommend waiver of any deficiency because the structure does not meet Life Safety Code Standards primarily in the following respects:

Required exits. (Sec. 10.2212)
Corridor width (Sec. 10.2233)
Door Construction type (Sec. 10.1322)

Correction of the above deficiencies is not feasible.

3. ☐ Initial Recommendation ☐ Repeat Recommendation

Period covered by present recommendation: From _____ To _____

4. ^{Not} Waivers are recommended because rigid application of L.S.C. provisions would result in unreasonable hardship for facility; any required structural changes are unfeasible; and waiver of provisions will not adversely affect health or safety of patients.

Signature of Surveyor and Title

Willie J. Galt
Signature of Reviewer and Title
Assoc. Architect

Part B - To be completed by HEW/FECA

5. Justification:

1. Screening rooms between corridors and exits.
2. Not all sleeping rooms have a door leading directly to a corridor.
3. Patient room doors are non-conforming.
4. Stairs are not class A or B.
5. No emergency lighting.
6. No fire alarm system.

6. Final Action

7. No. Waivers Appr'd

None

8. Emilio J. Galt - Chf. of Design
(Signature (and Title))

9. 12/26/73

Date of Action

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EX2

Medicare

U. S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

Medicaid

REPORT OF FIRE SAFETY SURVEY IN EXTENDED CARE FACILITIES, & SKILLED NURSING HOMES

Part I is a guide to surveying for compliance with the Life Safety Code (21st edition, 1967). Part II contains those Medicare and Medicaid fire safety requirements not otherwise identified in the Life Safety Code. Part III is a certification form to be completed by the fire authority when specific provisions of the Life Safety Code are recommended to be waived.

Identifying information as shown in applicable records. Enter changes, if any, alongside each item, giving date of change.

1. Name and address of facility
Case Nursing Home
114 Kirk Ave
Syracuse, N.Y.

2. Provider number (title XVIII) 33-A139
Vendor number (title XIX) _____
3. Date of survey 12/20/73

3. Survey for Certification of:

A. ☒ Entire facilityB. ☐ Extended or skilled care unit1. ☐ Hospital (type) _____2. ☐ Nursing Home3. ☐ Rehabilitation Center4. ☐ Domiciliary institution5. ☐ Institution for retarded6. ☐ Other

(Specify) _____

4. Number of ECF beds certified for Medicare _____
Number of skilled nursing beds certified for Medicaid 21
Number of intermediate care beds certified for Medicaid _____

5. Number of beds in entire facility (certified and non-certified) 21

6. The facility ☐ meets based upon, (check all appropriate boxes below) ☒ does not meet

☐ compliance with all provisions☐ acceptance of a plan of correction☐ recommended waivers

such standards of the National Fire Protection Association's Life Safety Code (21st edition 1967) as are applicable to nursing homes.

Surveyor Ronald Sharp Title P.H. Sanitarian Date 12/20/73

Fire Authority Official W. J. Anderson Title Associate Engineer Date 5/15/74

CT-1228 7/2/74

Part I - This is a guide to surveying for compliance with the Life Safety Code. It is not intended to be an all inclusive listing of Life Safety Code requirements, but rather as a guide to be supplemented by reference to the Code.

	Yes	No	Explanatory Statements
<u>EXITS</u>			
The exitways, exit openings, and exit discharges are so located and of sufficient number and width to permit the prompt evacuation of patients. 2-1			
<u>Number and Type</u> - At least 2 exits, remote from each other, are provided for each floor or fire section with at least one of the exits leading directly outside the building or to an interior stairway leading outside the building. 2-2 10-2211 10-2212		✓	(2-2) Two interior stairways must be used for exiting from 2nd floor. One leads to living room, the other to passage thru kitchen. Exits are not remote. One stairway is locked on 2nd floor.
<u>Access</u> - Every aisle, passageway, corridor exit discharge, exit location and "access" has a readily available egress leading to the exit. 2-3 10-2231		✓	(2-3) Some corridors are less than 48" wide, with furniture + closets obstructing egress to exits.
<u>Capacity</u> - The capacity of exits providing horizontal travel is 30 persons per exit unit. Where the travel is over stairs, the exiting capacity is 22 persons per exit unit. 2-4	✓		
<u>Horizontal Exit</u> - Any horizontal exit is in accordance with Section 5-5 and has at least 44 inches in clear width. 2-5 10-2261 10-2262			<input checked="" type="checkbox"/> N/A Horizontal exits not required.
<u>Corridor Egress</u> - Every corridor provides access to at least two approved means of egress from the building, without passing through any intervening rooms or spaces other than corridors or lobbies. 2-6 10-2235		✓	(2-6) Ex. Means of Egress from building is through kitchen or living room

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Life Safety Code Provisions	Yes	No	Explanatory Statements
<p><u>Corridor Width</u> - Any required aisle and corridor is not less than 48 inches in clear width when serving as means of egress from institutional sleeping rooms. (For new construction the corridor is 8 feet clear width.)</p> <p>3-1 10-2233</p>		✓	(3-1) 1st floor corridor is from 30-35" wide 2nd floor corridor is from 27"-45" wide
<p><u>Dead End</u> - Dead ends should be altered where possible. (In new buildings corridor dead ends are 30 feet or less)</p> <p>3-2 10-2235</p>		✓	(3-2) Exiting is available in only one direction on 2nd floor
<p><u>Room Egress</u> - All of the facility's sleeping rooms have a door leading directly to a corridor providing access to an exit.</p> <p>3-3 See 10-2234 for allowance of one intervening room.</p>		✓	(3-3) one bedroom on 1st floor is directly off kitchen
<p>Travel distances to an exit are 100 feet or less from any point in a room. (In buildings completely protected by an automatic sprinkler system these distances may be increased by 50 feet.)</p> <p>3-4 See 10-2242 for existing construction. New Constr. 10-1232</p>	✓		
<p><u>Door Width</u> - Any doorway to a patient's sleeping room, any doorway between these occupied spaces and the required exits and exit doorways are at least 40 inches. (44 inches in new buildings.)</p> <p>3-5 See 10-2242 for allowable exceptions.</p>		✓	(3-5) some doors are 25' to 24 1/2"
<p><u>Patient Rooms</u> - If locks are installed on patient sleeping room doors not leading directly to the exterior of the building, they can be locked only from the corridor side. All sleeping room locks are readily opened by the patient from inside the room without the use of a key.</p> <p>3-6 10-2243</p>	✓		
<p>Doors to patient rooms are 1 3/4" solid wood bonded core doors or the equivalent, with any openings limited to 1296 square inches with wired glass in approved metal frames. (Undercutting of such doors is not permitted). (3/4" clearance is allowed below fire doors) See 10-1332 for latch requirement in new buildings.</p> <p>3-7</p>		✓	(3-7) patient room doors are paneled top or with plain glass panes
<p>Every door in the line of exit travel from a patient's sleeping room is of the swinging type.</p> <p>3-8 10-2244</p>	✓		

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Life Safety Code Provisions	Yes	No	Explanatory Statements
<p>Window - Every patient's bedroom, unless it has a door leading directly outside of the building, has at least one outside window, which can be opened from the inside without the use of tools.</p> <p>4-1 10-2213</p>	✓		(4-2) N.H. - No fire or smoke partitions
<p>Fire and Smoke Partitions - Every door in a fire partition, horizontal exit, and smokestop partition may be held open only by electro-magnetic devices and is capable of being opened and closed manually. The door is closed upon actuation of the fire alarm system and by each of the installed approved methods. (Shown as A, B, C under "Explanatory Statements.")</p> <p>4-2 10-2245</p>			<p>Indicate which of the following methods will automatically close fire or smoke doors:</p> <p><input type="checkbox"/> A. Activation of the sprinkler system;</p> <p><input type="checkbox"/> B. Actuation of any detector of a complete smoke or products of combustion detection system;</p> <p><input type="checkbox"/> C. By local detection devices installed to detect smoke or other products of combustion on either side of the door opening.</p> <p><input type="checkbox"/> D. Doors do not close automatically.</p> <p><input type="checkbox"/> E. Non-applicable. There is no fire partition, horizontal exit or smoke stop partition.</p> <p><input type="checkbox"/> F. Other (describe) _____</p>
<p>Any door to a stairway enclosure or to a wall separating hazardous areas is not equipped with hold-open devices and stair well doors bear an appropriate sign indicating that this is a fire exit and must be kept closed. (A yes response would indicate the requirement is met.)</p> <p>4-3 10-2246 & 5-2133</p>		✓	N/A
<p>Fire doors of at least Class B, 1-hour rating are provided in openings to:</p>			
<p>Large storage rooms (larger than 100 square feet)</p>			✓
<p>Boiler rooms</p>		✓	
<p>Incinerator rooms</p>		✓	
<p>Laundry and trash rooms (see item 7-2)</p>			✓
<p>Dumbwaiters</p>		✓	
<p>Stairways</p>		✓	
<p>4-4</p>			

(4-3) Stair way door lacks sign

(4-4) Class B 1-hour doors are lacking in these areas

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Life Safety Code Provisions	Yes	No	Explanatory Statements
<u>Stairs, Smokeproof Towers, Ramps</u>			
All stairs serving as required means of egress are of permanent fixed construction.	✓		
5-1 5-3111			
Every stair and smokeproof tower is Class A or B (Class B specifications are not acceptable in new construction.)		✓	(5-2) Stairs are not class A or B
5-2 5-3121			
<u>Exit Lighting</u> - Exitways are illuminated at angles, inter-sections, landings of stairs, and exit doors to values of not less than 1.0 foot-candle measured at the floor. 10-2272	✓		(5-4, 5-5) No emergency lighting
5-3 5-10113			
<u>Exit signs</u> are continuously illuminated with a reliable light source with a value of not less than 5 foot candle power measured on the illuminated surface and include the word exit in plainly legible letters 6 inches high.		✓	
5-4 5-11121			(5-8) Indicate type of construction (as defined in NFPA 220) Fire Resistive Non-Combustible <input type="checkbox"/> Protected <input type="checkbox"/> Non-protected Ordinary Heavy Timber <input type="checkbox"/> Protected <input type="checkbox"/> Non-protected Wood Frame Multiple Construction Type <input type="checkbox"/> Protected <input type="checkbox"/> Explain _____ <input checked="" type="checkbox"/> Non-protected
Required emergency lighting is automatic and not manual.		✓	
5-5 5-10215			
Emergency lighting with an independent power source is provided.		✓	
5-6			
<u>PROTECTION</u>			
The facility is adequately protected against the spread of fire and smoke and is equipped in accordance with the Life Safety Code to detect, contain, and extinguish fires.			
5-7			
<u>Construction Type</u> - Building construction complies with Section 10-1301 and 10-1302.		✓	Number of stories (not including basement or cellar) <u>2</u> If multiple stories, indicate floors on which patient rooms are located: <u>1, 2</u>
5-8			Date building permit issued or approval given by appropriate authority <u>4/4/80</u> Date and description of type of all subsequent construction including renovations, additions or deletions
Corridor enclosures between sleeping rooms and treatment areas are separated by construction having at least a one-hour fire resistance rating, with openings therein, if any, limited to 1296 square inches and glazed with wired glass in approved metal frames. (This refers to corridor walls.)		✓	
5-9			
<u>Subdivision of Floor Areas</u> - Each floor used for sleeping rooms for more than 30 patients, unless provided with a horizontal exit, is divided into at least two sections by a smoke barrier. (New buildings are required to provide compartmentation on patient floors regardless of the number of patients.) (See definition of horizontal exit in 5-5111.)			(5-8) building is lower (story) wood-frame construction.
5-10 10-2311			(5-11) less than 30 patients per floor.

Life Safety Code Provisions		Yes	No	Explanatory Statements
Ample space is provided on each side of the barrier for the total number of patients on both sides. 6-1 10-2213	NA			
Smoke barriers have at least 1/2 hour fire rating and are continuous from wall to wall and floor to floor or roof deck above. (In new buildings, the smoke barrier has a fire resistance rating of one hour.) 6-2 10-2213				<input checked="" type="checkbox"/> N/A No corridors over 150 feet in length.
Smoke barriers or horizontal exits divide corridors of more than 150'. 6-3 10-2312	NA			
Source wall - If the building shares a common wall with a non-conforming structure, the wall is at least a 2-hour fire rated partition, with any openings protected by self-closing class B 1 1/2 hour fire doors. (See 10-1131 - permits such doors to be kept open only if equipped as smokestop doors.) 6-4				<input checked="" type="checkbox"/> Not applicable
<u>Protection of Vertical Openings and Firestopping</u> Stairway - Each stairway between stories is enclosed with partitions having at least a 1-hour fire resistance rating to prevent the spread of fire between stories. 6-5 10-2221				✓ (6-5) neither stairway is enclosed with 1-hour rated partitions
Exit doors - are in a closed position except that if left open they must close automatically in case of fire by electro-release device. Allowed under unusual circumstances set forth in 10-2321 & 5-2134. 6-6			✓	
Vertical Shafts - Elevator shafts, light and ventilation shafts, chutes, and other vertical openings between stories are protected as required for stairways. 6-7 10-2322			✓	(6-7) dumbwaiter shaft not 1-hour protected, as well as vertical penetrations of heating ducts

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Life Safety Code Provisions	Yes	No	Explanatory Statements
<u>Fire Stopping</u> - Combustible concealed spaces are fire stopped. 7-1 10-2323 & 6-1311	✓		
<u>Linen and Trash Chutes</u> - Any linen and trash chute which opens directly onto a corridor is sealed by fire-resistive construction to prevent further use or is provided with a 1-hour fire door assembly suitable for a Class B location. (In new construction, chute and incinerator flues do not open directly onto an exit corridor and chutes are sprinklered.) 7-2 10-2324		✓	(7-2) Linen chute not adequately sealed off.
<u>Interior Finish</u> - Interior finish is Class A or Class B. (In completely sprinklered buildings, Class C interior finish may be continued in use. In newly constructed buildings, means of egress and patient rooms accommodating more than 4 patients is of Class A interior finish.) 7-3 6-2	✓		(7-4) <u>Floor Covering</u> <input type="checkbox"/> Carpet not tested. <input checked="" type="checkbox"/> Not applicable. (Floor covering not an unusual hazard.) If carpeting has been tested, show: Test Rating _____ Date Tested _____ Testing Laboratory _____
<u>Floor Covering</u> - Has no more than a 75 interior finish flame spread rating when tested in accordance with NFPA Std. No. 255. (Floor covering is required to be tested, only when the fire authority of jurisdiction believes the floor covering to constitute an unusual hazard.) 7-4 6-2112	✓		(7-5) <u>Sprinklers</u> <input type="checkbox"/> Not applicable. Facility is fire resistive building or 1-hour protected noncombustible building of one story.
<u>Sprinklers</u> <u>Coverage</u> - Automatic sprinkler protection is provided throughout the facility, with adequate water supply and pressure. (15 psi. at the most remote sprinkler heads.) 7-5 10-2341	✓		Indicate date <u>Not known at Time</u> automatic sprinkler system was last checked and necessary maintenance provided. Show who provided the service: _____ Note the type of water supply to the sprinkler system <u>Public</u>

A173

Life Safety Code Provision	Yes	No	Explanatory Statements
If the preceding sprinkler coverage provision has been answered "no," answer next four items:			
<p>(1) <u>Hazardous Areas</u> - All hazardous areas are sprinklered</p> <p>8-1</p>			
<p>(2) <u>Detection System</u> - Automatic fire detection devices are installed in all areas required by the Life Safety Code to be protected by an automatic sprinkler system. The detection system is listed with UL's Fire Protection List, issuance of January 1971. The system is arranged to close all fire doors in barrier partitions and, where possible, shall be hooked into the local fire department or central control. At a minimum the detection system must activate an alarm system inside and outside the building.</p> <p>8-2</p>			<p>Please indicate type of detectors</p> <p>_____</p> <p>Areas protected by detectors</p> <p>_____</p> <p>_____</p>
<p><u>Segregation</u> - Patient rooms are separated from each other and all other areas by construction having at least a 1-hour fire resistive rating.</p> <p>8-3</p>			
<p>(1) <u>Fire Department Response</u> - The response time and capability of the local fire department is adequate, in the judgment of the State Fire authority official, to provide an acceptable level of protection for an unsprinklered facility.</p> <p>8-4</p>			<p><input type="checkbox"/> State fire authority official's statement regarding local fire department capability is on file.</p>
<p><u>Alarm System</u> - The automatic sprinkler system is electrically inter-connected with the fire alarm system. The main sprinkler control valve is electrically supervised so that at least a local alarm will sound when the valve is closed.</p> <p>8-5 10-23AA 4 12-1A12</p>		✓	<p>(8-5) Main sprinkler control valve under electrical supervision</p>
<p>Manually operated alarm system is provided and tested at least weekly. (Pre-signal system is not acceptable.)</p> <p>8-6 10-23AA 4 12-1A12</p>		✓	<p>(8-6) alarm system provided but not tested weekly.</p> <p>Date manual alarm system last tested</p> <p>Not known at time of survey</p>
<p><u>Extinguishers</u> - A sufficient number of fire extinguishers are properly situated, checked annually, and are maintained in workable condition, in accordance with NFPA Standards 10 and 10A.</p> <p>8-7</p>		✓	<p>Person who provides maintenance of extinguishers Syracuse Fire Equip Service</p> <p>Date extinguishers last checked/serviced</p> <p>10/73</p>

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Life Safety Code Provisions	Yes	No	Explanatory Statements
<u>Hazardous Areas</u> - Every hazardous area has automatic fire protection or is separated by construction having at least 1-hour fire resistance rating. Where a hazard is severe, both fire-resistive construction and automatic fire protection is used. 9-1 10-2351	✓		Following hazardous areas are protected by automatic extinguishing systems and/or fire separated. AES - Automatic extinguishment system S - Separated
<u>BUILDING SERVICE EQUIPMENT</u>			<u>AES</u> <u>S</u>
Air exchange and conditioner service equipment is designed, installed, and maintained so as not to precipitate or spread fires. 9-2			✓ -- Boiler, heater rooms ✓ -- Incinerator ✓ -- Laundries ✓ -- Repair shops ✓ -- Laboratories using quantities of flammable solvents ✓ -- Areas storing quantities of combustibles ✓ -- Trash collection rooms ✓ -- Employee locker rooms ✓ -- Soiled linen rooms ✓ -- Kitchen ✓ -- Handicraft shop ✓ -- Gift shops
Air conditioning, ventilating, heating, cooking, and other service equipment appears to be properly installed and maintained. 9-3 10-2411		✓	
Heating devices are designed or enclosed to prevent the ignition of clothing or furnishings. 9-4	✓		
Portable comfort heating devices are not used. (Indicate "yes" if requirement is met.) 9-5 10-2412	✓		
Products of combustion from heating devices are vented outside and air for combustion is taken from outside. 9-6 10-2413	✓		(9-3) lack range hood with extinguishing device in kitchen.

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Life Safety Code Provisions	Yes	No	Explanatory Statement
<u>OPERATING FEATURES</u>			
Operating safeguards adequately protect the occupants of the facility against the hazards of fire. 10-1			(10-2) not available on date of survey
<u>Fire Protection Plan</u> - The facility has in effect and available to all supervisory personnel written copies of a plan for the protection of all persons in the event of fire and their evacuations to areas of refuge and from the building. 10-2 17-4.111		✓	(10-4) fire drills are not held.
<u>Evacuation Plan Posted</u> - The evacuation plan is posted in prominent locations on all floors. 10-3	✓		Instruction sessions given by administrator in April
<u>Fire Drills</u> - Fire drills are held at least 12 times a year. 10-4 17-4.113		✓	Fire drills were conducted over the past 12 months on each shift on the following dates: not done
Fire drills are conducted at irregular intervals during day and night to familiarize all employees with their responsibilities. 10-5 17-4.113 & 17-11		✓	Day _____ Evening _____ Night _____
<u>Furnishings and Decorations</u> - Furnishings and decorations do not obstruct exits or the ability to locate exits. 10-6 17-12.1		✓	(10-6) Desk + furniture obstructs corridor, and stack wall on 2nd floor
All combustible draperies and curtains (including cubicle curtains for decorative or acoustical purposes) are rendered and maintained flame retardant. 10-7 17-4.151		✓	(10-7) draperies and curtains appear to not be flame retardant.
Waste baskets are of non-combustible material. 10-8 17-4.141		✓	(10-8) waste baskets are plastic
<u>Smoking</u> - Smoking regulations are in effect and are prominently posted throughout the building. 10-9 17-4.101		✓	(10-9) regulations exist but are not posted

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PART II

Part II contains those requirements not otherwise identified in the Life Safety Code.

Other Requirements (Non-waiverable)	Yes	No	Explanatory Statements
The facility complies with all applicable State and local codes governing construction and fire safety.		✓	non-compliance Building code adopted by jurisdiction: <u>Nat'l Bld Code</u>
Reports of periodic inspections of the structure by the fire control authority having jurisdiction in the area are on file in the facility, including documentation of corrections made.	✓		Date of last fire inspection: <u>12/20/73</u>
Corridors used by patients are equipped with firmly secured handrails on each side.	✓		
Blind patients and non-ambulatory or physically handicapped patients are not housed above the street level floor, unless the facility is of fire resistive construction, 1-hour protected non-combustible construction, or 1-hour protected ordinary or wood-frame construction sprinklered throughout.		✓	Non ambulatory patients on 2nd floor
The building is maintained in good repair and kept free of hazards such as those created by any damaged or defective building equipment.		✓	building is in poor repair Equipment old, Linolium floor in poor repair.
No occupancies or activities undesirable to the health and safety of patients are located in the building or buildings of the extended care facility.	✓		
Non-flammable medical gas systems, such as oxygen and nitrous oxide installed in the facility comply with applicable provisions of NFPA Std. No. 56 on inhalation therapy.			N.A.

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PART III

A. RECOMMENDATION FOR WAIVER OF SPECIFIC LIFE SAFETY CODE PROVISIONS

The following unmet provisions of the Life Safety Code (21st Edition, 1967) do not adversely affect the health and safety of patients in the extended care facility for the reasons set forth below. In addition, strict adherence to these Code provisions would result in an unreasonable hardship on the facility.

For homes which are surveyed for title XLX, (Medicaid), Form SRS-MEA-L(LTC)(OMB 83-R0259) - "Recommendation for Waiver" must also be completed for each unmet provision waived.

Surveyor

Signature

Title

Office

Date

Fire Authority Official

Signature

Title

Office

Date

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PART III

B. RECOMMENDATIONS, PLAN OF CORRECTION, PRIORITIES AND OTHER REMARKS

Surveyor

Signature

Title

Office

Date

Fire Authority Official

Signature

Title

Office

Date

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PART III

C. BUILDING SKETCH

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FECA

FIRE SAFETY SURVEY REPORT
Medicare - Medicaid

1. DATE OF SURVEY

10-21-74

Part I is a guide to surveying for compliance with the Life Safety Code (21st edition, 1967). Part II contains those Medicare and Medicaid fire safety requirements not otherwise identified in the Life Safety Code. Part III contains a certification form to be completed by the fire authority when waiver of a specific provision of the Life Safety Code is recommended. Building sketches can also be included in Part III.

Identifying information as shown in applicable records. Enter changes, if any, alongside each item, giving date of change.

2. NAME OF FACILITY

CASE NURSING HOME

ADDRESS OF FACILITY (STREET, CITY, STATE, ZIP CODE)

119 KIRK AVE.
SYRACUSE, NEW YORK 13205

3. SURVEY FOR:

☐ MEDICARE

☒ MEDICAID

4. PROVIDER NO. (TITLE XVIII)

VENDOR NO. (TITLE XIX)

5. SURVEY FOR CERTIFICATION OF:

A. ☐ HOSPITAL

B. ☒ SKILLED NURSING FACILITY

C. ☐ INTERMEDIATE CARE FACILITY

IF "B" OR "C" IS CHECKED, CHECK APPROPRIATE ITEM(S) BELOW:

(1.) ☒ ENTIRE FACILITY

(2.) ☐ DISTINCT PART OF:
(SPECIFY) _____

(3.) IF DISTINCT PART OF HOSPITAL, IS HOSPITAL ACCREDITED
BY JCAH?

a. ☐ YES

b. ☐ NO

6. BED COMPOSITION:

a. TOTAL NO. OF BEDS IN THE
FACILITY.

21

b. NUMBER OF HOSPITAL BEDS
CERTIFIED FOR MEDICARE.

c. NUMBER OF SKILLED BEDS
CERTIFIED FOR MEDICARE.

d. NUMBER OF SKILLED BEDS
CERTIFIED FOR MEDICAID.

e. NUMBER OF ICF BEDS
CERTIFIED FOR MEDICAID.

7. A. ☐ THE FACILITY MEETS, BASED UPON (CHECK ALL APPROPRIATE BOXES):

1. ☐ COMPLIANCE WITH ALL PROVISIONS

2. ☐ ACCEPTANCE OF A PLAN OF CORRECTION

3. ☐ RECOMMENDED WAIVERS

such standards of the NFPA Life Safety Code (21st edition, 1967) as are applicable to hospitals or nursing homes as well as other Medicare and Medicaid requirements as shown in Part II of this form.

B. ☐ THE FACILITY DOES NOT MEET THE STANDARD.

SURVEYOR (SIGNATURE)

William L. Hutter, P.E.

TITLE

CIVIL ENGINEER

OFFICE

FECA D/Hew

DATE

10-21-74

FIRE AUTHORITY OFFICIAL (SIGNATURE)

TITLE

OFFICE

DATE

	MET	NOT MET	NOT APP.	EXPLANATORY REMARKS
2-1. Construction Type - Building construction complies with Section 10-1321 and 10-1322.		✓		2-1. INDICATE TYPE OF CONSTRUCTION AS DEFINED IN NFPA 220 (STANDARD TYPES OF BUILDING CONSTRUCTION, 1951.)
2-2. Corridor Walls - Corridors shall be separated from sleeping rooms and treatment areas by construction having at least a 1-hour fire resistance rating with openings therein, other than doors, limited to 1296 square inches and glazed with wired glass in approved steel frames. 10-1331		✓		1. <input type="checkbox"/> FIRE RESISTIVE 2. <input type="checkbox"/> NON-COMBUSTIBLE 3. <input type="checkbox"/> PROTECTED NON-COMBUSTIBLE 4. <input type="checkbox"/> ORDINARY 5. <input type="checkbox"/> PROTECTED ORDINARY 6. <input type="checkbox"/> HEAVY TIMBER 7. <input checked="" type="checkbox"/> WOOD FRAME 8. <input type="checkbox"/> PROTECTED WOOD FRAME
2-3. Corridor Doors - Doors to patient rooms and diagnostic and treatment areas are 1 3/4" solid wood bonded core doors or the equivalent with any openings limited to 1296 square inches with wired glass in approved steel frames. (Undercutting of such doors is not permitted). 10-1332		✓		B. Indicate number of stories, not including basement or cellar: <u>6</u> C. If multiple stories, indicate floors on which patient rooms are located: <u>1st 2nd 3rd 4th 5th</u>
2-4. Subdivision of Floor Areas - Each floor used for sleeping rooms for more than 30 patients, unless provided with a horizontal exit, is divided into at least two sections by a smoke barrier. (New buildings are required to provide compartmentation on patient floors regardless of the number of patients). (See definition of horizontal exit in 5-5111). 10-2311			✓	D. Date original building permit issued or approval given by appropriate authority: <u>APPROX 1920</u> (Complete sketch in Part III showing original and subsequent construction dates)
2-5. Smoke Barriers - Smoke barriers or horizontal exits divide corridors into sections of not more than 150 feet in length. 10-2312			✓	
2-6. Smoke Barriers have at least a 1/2 hour fire rating and are continuous from exterior wall to exterior wall and floor to floor or roof deck above. (In new buildings the smoke barrier has a fire-resistance rating of one hour) 10-2313			✓	
2-7. Common Wall - If the building shares a common wall with a non-conforming structure, the wall is at least a 2-hour fire rated partition with any openings protected by a self-closing Class B 1 1/2 hour fire door. 10-1131			✓	
2-8. Stairway Enclosures - Each stairway between stories is enclosed with partitions having at least a 1-hour fire resistance rating to prevent the spread of fire between stories. 10-2321		✓		
2-9. Doors in stairway enclosures are not equipped with hold-open devices. 10-2246	✓			
2-10. Doors in walls separating hazardous areas are not equipped with hold-open devices. 10-2246	✓			

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	MET	NOT MET	NOT APP.	EXPLANATORY REMARKS
3-1. Stairs and smokeproof towers are Class A or Class B. (Class B specifications are not acceptable in new construction). 10-2251, 5-3121		✓		MAIN 40" W. RST. 30" W. 8 1/4" x 8" T
3-2. Vertical Shafts - Elevator shafts, light and ventilation shafts, chutes, and other vertical openings between stories are protected as required in item 2-8. 10-2322		✓		
3-3. Fire-Stopping - Combustible concealed spaces between the basement and the first floor are fire-stopped. (Fire stopping in new construction shall be in accordance with 6-1311) 10-2323	✓			
3-4. Linen and Trash Chutes - Any linen or trash chute which opens directly on to a corridor is sealed by fire-resistive construction to prevent further use or is provided with a door assembly suitable for a Class B location. (In new construction, chute and incinerator flues do not open directly on to an exit corridor and chutes are sprinklered). 10-2324, 7-113		✓		
3-5. Exits - Number and Type - At least two exits, remote from each other, are provided for each floor or fire section. At least one of the exits is a door leading directly outside the building or to an interior stairway leading outside the building. 10-2211, 10-2212		✓		
3-6. Access - Every aisle, passageway, corridor exit discharge, exit location and "access" has a readily available egress leading to the exit. (In new buildings, corridor dead-ends shall not exceed 30 feet. 10-2231, 10-1234		✓		
3-7. Capacity - The capacity of exits providing horizontal travel is 30 persons per exit unit. Where the travel is over stairs, the exiting capacity is 22 persons per exit unit. 10-2221	✓			
3-8. Horizontal Exit - Any horizontal exit is in accordance with section 5-5 and has at least 44 inches in clear width. 10-2261			✓	
3-9. Corridor Width - Aisles and corridors are a minimum of 48 inches in clear width when serving as a means of egress from institutional sleeping rooms. (For new construction the corridor is 8 feet in clear width). 10-2232, 10-1233		✓		
3-10. Room Egress - All sleeping rooms have a door leading directly to a corridor providing access to an exit, unless there is a door leading directly to grade. See 10-2234 for allowance of one intervening room.		✓		KENZ B30 + MAIN KITCHEN

	MET	NOT MET	NOT APP.	EXPLANATORY REMARKS
4-1. Travel distances to an exit are 100 feet or less from the entrance door and 150 feet from any point in a room. <i>(In buildings completely protected by an automatic sprinkler system these distances may be increased by 50 feet.)</i> 10-2232; for new construction: 10-1232	✓			
4-2. Door Width - Any door to a patient's sleeping room, any door between occupied spaces and the required exits and exit doorways are at least 40 inches. <i>(44 inches in new buildings.)</i> See 10-2242 for allowable exceptions.		✓		
4-3. Patient Rooms - Locks installed on patient sleeping room doors other than doors not leading directly to the exterior of the building can be locked only from the corridor side. All sleeping room locks are readily opened by the patient from inside the room without the use of a key. Patient room doors lockable from the inside are permitted provided they can be unlocked from the corridor side and the keys are readily available to attendants. 10-2242	✓			
4-4. Doors in Line of Exit Travel - Every door in the line exit travel from a patient's sleeping room is of the swinging type. 10-2244	✓			
4-5. Windows - Every patient's bedroom, unless it has a door leading directly outside of the building, has at least one outside window which can be opened from the inside without the use of tools. 10-2213	✓			
4-6. Doors in Fire and Smoke Partitions - Every door in a fire partition, horizontal exit, and smokestop partition shall be self-closing. Doors may be held open only by electric hold-open devices and are capable of being opened and closed manually. Doors shall be closed upon actuation of the fire alarm system and by one of the approved methods shown as A, B, C in Explanatory Remarks. However, if more than one of the protection systems is installed, each system upon actuation, must close all fire and smoke partition doors. 10-2245, 10-2313			✓	<p>4-6. Closing Fire and Smoke Doors - Indicate which of the following methods will automatically close those fire or smoke doors which are normally held open:</p> <p><input type="checkbox"/> A. Activation of the sprinkler system.</p> <p><input type="checkbox"/> B. Actuation of any detector of a complete smoke or products of combustion detection system.</p> <p><input type="checkbox"/> C. By local detection devices installed to detect smoke or other products of combustion on either side of the door opening.</p>
4-7. Stairwell doors bear an appropriate sign indicating that this is a fire exit and must be kept closed. 10-2133		✓		
4-8. Exit Lighting - Means of egress are illuminated to permit safe evacuation of patients. 10-2272, 5-10113	✓			

	MET	NOT MET	NOT APP.	EXPLANATORY REMARKS
5-1. Exit and Directional Signs are continuously illuminated with a reliable light source and include the word EXIT in easily visible letters. 10-2271, 5-11121	✓			CASE
5-2. Hospitals Only: <i>(Indicate Not Applicable for Nursing Homes)</i> Central electrical systems are designed, installed, and maintained to assure continuity of electrical power in accordance with NFPA Standard No. 75 <i>(Essential Electrical Systems for Hospitals, 1967)</i> 10-1293			✓	
5-3. Emergency lighting of Type I, II or III is provided in facilities with an inpatient capacity or more than 30 persons. <i>(In new buildings only types I or II are permitted.)</i> 10-2273, 5-102, 10-1294			✓	
5-4. Required emergency lighting is automatic and not manual. 10-10215		✓		
5-5. Interior finish of walls and ceilings is Class A or Class B. <i>(In completely sprinklered buildings, Class C interior finish may be continued in use. In newly constructed buildings, means of egress and patient rooms accommodating more than 4 patients have Class A interior finish).</i> 6-2, 10-1351, 10-2331	✓			
5-6. Floor Covering has a flame spread rating not in excess of 75 when tested in accordance with NFPA Standard 255, "Flame Spread Tests". <i>(Flame spread rating of floor covering in completely sprinklered existing buildings is not over 200).</i>	✓			5-6. A. Floor Covering Indicate type of finish floor or floor covering: <input type="checkbox"/> a. Concrete, marble, terazzo, etc. <input checked="" type="checkbox"/> b. Resilient <input type="checkbox"/> c. Carpeting
5-7. Sprinkler Coverage - Automatic Sprinkler protection is provided throughout the facility with adequate water supply and pressure <i>(15 psi at the most remote sprinkler heads)</i> . Fire resistive buildings or 1-hour protected non-combustible buildings of one story should be marked "Not Applicable." 10-2341, NFPA Std. 13	✓			B. Indicate floor covering test score: <input type="checkbox"/> a. 0-75 <input type="checkbox"/> c. over 200 <input type="checkbox"/> b. 76-200 <input type="checkbox"/> d. not tested
5-8. Sprinkler System Maintenance - Automatic sprinkler systems are maintained, inspected and tested in accordance with NFPA Standard 13A <i>(Care and Maintenance of Sprinkler Systems)</i> 6-4131	✓			C. Testing Laboratory:
5-9. Sprinkler Alarm System - The automatic sprinkler system is electrically inter-connected with the fire alarm system. 10-2342	✓			5-8. Sprinklers: A. Indicate date _____ automatic sprinkle system was last checked & necessary maintenance last provided.
5-10. The main sprinkler control valve is electrically supervised so that at least a local alarm will sound when the valve is closed. 10-2342		✓		B. Show who provided the service:
5-11. Manually operated fire alarm system is provided. In new buildings it is electrically supervised. <i>(Pre-signal system is not acceptable)</i> 10-2344 10-1245	✓			C. Note the source of water supply for the sprinkler system: PUBLIC - CITY OF SYRACUSE